

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

..... Rejected
 Allowed
 (Through numeral)..... Canceled
 Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	
26	
27	
28	
29	
30	
31	
32	
33	
34	
35	
36	
37	
38	
39	
40	
41	
42	
43	
44	
45	
46	
47	
48	
49	
50	

Claim	Date
Final	
Original	
51	
52	
53	
54	
55	
56	
57	
58	
59	
60	
61	
62	
63	
64	
65	
66	
67	
68	
69	
70	
71	
72	
73	
74	
75	
76	
77	
78	
79	
80	
81	
82	
83	
84	
85	
86	
87	
88	
89	
90	
91	
92	
93	
94	
95	
96	
97	
98	
99	
100	

Claim	Date
Final	
Original	
101	
102	
103	
104	
105	
106	
107	
108	
109	
110	
111	
112	
113	
114	
115	
116	
117	
118	
119	
120	
121	
122	
123	
124	
125	
126	
127	
128	
129	
130	
131	
132	
133	
134	
135	
136	
137	
138	
139	
140	
141	
142	
143	
144	
145	
146	
147	
148	
149	
150	

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

09/868305

Index of Claims



Application No.

09/868,305

Examiner

Thomas McKenzie, Ph.D.

Applicant(s)

ALBERS ET AL.

Art Unit

1624

✓	Rejected
=	Allowed

—	(Through numeral) Cancelled
÷	Restricted

N	Non-Elected
I	Interference

A	Appeal
O	Objected

Claim		Date						
Final	Original	1/7/04						
	1							
	2							
	3							
	4							
	5							
	6							
	7							
	8							
	9							
	10							
	11							
	12							
	13							
	14							
	15							
	16							
	17							
	18							
	19							
	20							
	21							
	22							
	23							
	24	✓						
	25	✓						
	26	=						
	27	=						
	28	=						
	29	=						
	30	=						
	31	=						
	32	=						
	33	=						
	34	=						
	35	✓						
	36	✓						
	37	✓						
	38	✓						
	39	✓						
	40	✓						
	41	✓						
	42	✓						
	43	✓						
	44							
	45							
	46							
	47							
	48							
	49							
	50							

Claim		Date						
Final	Original							
	51							
	52							
	53							
	54							
	55							
	56							
	57							
	58							
	59							
	60							
	61							
	62							
	63							
	64							
	65							
	66							
	67							
	68							
	69							
	70							
	71							
	72							
	73							
	74							
	75							
	76							
	77							
	78							
	79							
	80							
	81							
	82							
	83							
	84							
	85							
	86							
	87							
	88							
	89							
	90							
	91							
	92							
	93							
	94							
	95							
	96							
	97							
	98							
	99							
	100							

Claim		Date						
Final	Original							
	101							
	102							
	103							
	104							
	105							
	106							
	107							
	108							
	109							
	110							
	111							
	112							
	113							
	114							
	115							
	116							
	117							
	118							
	119							
	120							
	121							
	122							
	123							
	124							
	125							
	126							
	127							
	128							
	129							
	130							
	131							
	132							
	133							
	134							
	135							
	136							
	137							
	138							
	139							
	140							
	141							
	142							
	143							
	144							
	145							
	146							
	147							
	148							
	149							
	150							